

# AuthentiCare® Kansas

Kansas Department for Aging and Disability Services  
HCBS

**January 19-20, 2016**



**First Data®**

# Agenda

- ❑ Overview of December 15, 2015 and January 1, 2016 System Enhancements
- ❑ Overview of January 21, 2016 System Enhancements and IVR Enhancements
- ❑ Overview of AuthentiCare Kansas Entities
- ❑ Review of Master Worker, New Reports, Representative, Enhanced Workers by Provider Report
- ❑ IVR Enhancements - New Names and Acronyms for Services
- ❑ Demonstrations As We Go
- ❑ Q & A after each topic

*Please keep your phone on mute until the Q & A Time for each topic. Please do not place your phone on hold.  
That keeps the background noise to a minimum during the training.*

## December 15, 2015 IVR Change

- ❑ The IVR language upon check-in and check-out changed at the summary points  
In Kansas, the waiver model for self-directed consumers is Consumer as Employer.
- ❑ The IVR message that Direct Support Workers (DSWs) heard upon check in and check out, after the install of December 15, 2015, did not call out the name of the provider or the FMS agency, but the name of the client instead.
- ❑ Workers providing services then heard:

If you are Worker \_ \_ \_ \_ \_ and you are providing \_\_\_\_\_service for (Test Client, press 1).

If you are Worker \_ \_ \_ \_ \_ and you have provided \_\_\_\_\_service for (Test Client, press 1).

# January 1, 2016 AuthentiCare System Enhancements

- ❑ Rate Change for Sleep Cycle Support in AuthentiCare Kansas
- ❑ Business Rules for all eight Sleep Cycle Support services became consistent.

As an example:

**Service Settings**

\* Indicates a required field.

\* ID: HCFET2025

\* Name: FE - Sleep Cycle Support

Description: FE - Sleep Cycle Support

Procedure Code: T2025

Authorization Required: Yes

Auto Claim Allowed: No

\* Mobile Enabled: Yes

\* IVR Enabled: Yes

\* Service Type: Time Based

\* Time Per Unit: 12 Hours

\* Check Out Window: 840 Minutes

\* Early Visit Threshold: Use Jurisdiction Threshold

\* Late Visit Threshold: Use Jurisdiction Threshold

\* Missed Visit Threshold: Use Jurisdiction Threshold

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\* Rate: 78.3000

# January 21, 2016 AuthentiCare System Enhancements

- ❑ AuthentiCare Entities
  1. Existing Entities Review
  2. New Entities Review
- ❑ Master Worker Creation
- ❑ Creation of Two New Reports
  1. Master Worker Hours Report
  2. Overlapped Claims by Master Worker Report
- ❑ Workers by Provider Report Enhancement
- ❑ Creation of Representative for Self-Directed Consumer
  1. Representative Access to AuthentiCare
  2. Representative Rights in AuthentiCare
- ❑ Services Changes
  1. New Names and Acronyms for Services
  2. IVR Changes

# AuthentiCare Entities

☐ Existing:  
Clients  
Providers  
Workers  
(State Admins)  
(Payers-MCOs)

☐ New:  
Master Worker  
Representative

☐ New:  
Entity Type in  
Entities section of  
Home page.

The screenshot shows the 'Entities' section of the AuthentiCare interface. It features a header 'Entities' and two 'Add New' links: 'Worker' and 'Representative'. Below these is an 'Entity Type' dropdown menu that is currently open, showing a list of options: 'Client', 'Worker', 'Master Worker', and 'Representative'. A 'Search' button is located to the right of the dropdown. A small 'Go!' button is visible at the bottom right of the dropdown menu.

The screenshot shows the 'Services and Authorizations' section. It has a 'Search Type' section with two radio buttons: 'Service' and 'Authorization', with 'Authorization' selected. Below this are several input fields: 'Service', 'Authorization ID', 'Service Type' (a dropdown), 'Authorization Start' (a date picker), 'Authorization End' (a date picker), 'Client', 'Provider', 'Worker', 'Payer', 'Service Period', and 'Procedure Code'. At the bottom right, there are 'Go!' and 'Clear' buttons.

The screenshot shows the 'Claims' section. It has two 'Add New' links: 'Claim (Standard)' and 'Claim (Express)'. Below these is a radio button for 'Claim', which is selected. There are two 'Search Type' options: 'Confirm Billing - View' and 'Confirm Billing - Bulk'. A 'Claim ID' input field is followed by 'Go!' and 'Clear' buttons. Below this are 'Claim Status' (a dropdown), 'Claim Start' (a date picker), 'Claim End' (a date picker), 'Service' (a dropdown), 'Authorization ID', 'Client', 'Provider', 'Worker', 'Representative', 'Procedure Code', and 'User Option' (a dropdown). At the bottom, there is a checkbox for 'Include Inactive Claims?' and 'Go!' and 'Clear' buttons.

# New Entity: Master Worker

- ☐ Created when a provider creates a new worker who does not already have a Master Worker record.
- ☐ A Master Worker ID is a seven-digit number.
- ☐ Workers with the same SSN or Work Visa Number will each have their respective five-digit Worker ID numbers in AuthentiCare, but
- ☐ All Workers sharing the same SSN or Work Visa Number will share an identical seven-digit Master Worker ID number.

# New Worker Saved – Five-Digit Worker ID Created

**Worker Entity Settings**

\* Indicates a required field.

ID: 06506

PIN: \*\*\*\*\*

\* First Name: Test

Middle Name:

\* Last Name: Worker1

Company Name:

\* SSN: \*\*\*\*\*6352

Work Visa Number:

Gender: Female ▼

\* Birth Date: 9/1/1980 ▼

Email Address:

\* Begin Date: 9/1/2014 ▼

End Date: ▼

Language: English ▼

Status: Active ▼



# As Well As the Seven-Digit Master Worker ID

\* Bilingual: No

External Worker ID:

Family Member:

\* Language accommodation needed: No

\* Related to client: No

\* Sign Language: No

Termination reason:

\* Worker Services:

- Level 2 PCS - FE
- Self Directed PCS - FE
- Level 1 PCS - FE
- Adult Day Care - FE
- PERS - Install - FE

\* Mobile Enabled: ☐ Yes ☒ No

\* Mobile Locked: ☐ Yes ☒ No

Password:

Worker Must Change Password: ☐

Mobile phone number:

Device ID:

Office Phone:

Master Worker ID: 1640093

Provider: CMC Test Provider

# Providers Can View the Master Worker Entity Page

## Master Worker Entity

Master Worker ID: 4060772

Name: sweet, nikki

SSN: \*\*\*\*\*3333

Work Visa Number:

- ❑ A search from the Home Page for Master Worker displays the Master Worker Entity Page.

## Hours Worked This Week (Sunday-Saturday)

<u>Employer(Client Self-Directed)</u>	<u>Representative</u>	<u>MCO</u>	<u>Vendor Fiscal Agent</u>	<u>Incomplete Visits</u>	<u>Hours Worked Today</u>	<u>Hours Worked This Week</u>
CONSUMER53, KTEST (00102369903)	Consumer, Test (38928)	UHC	CMC Test Provider	1	0.00	2.00
CONSUMER522, KTEST (00102368802)		Amerigroup	CMC Test Provider	0	0.00	40.73
CONSUMER50, KTEST (00102369900)	Rep, Test900(38909)	UHC	CMC Test Provider	0	12.02	22.55
					12.02	65.28
<b>Grand Total</b>					12.02	65.28

## Provider Registrations

<u>Worker Name</u>	<u>Provider Name</u>	<u>Active?</u>
Worker, Komtest(60125)	CMC Test Provider(5678912348)	Yes
Workerkom, Test(67800)	CMC Test Provider(5678912348)	Yes
WorkerKom, Test(30268)	CMC Test Provider(5678912348)	Yes

## Advantages of the Master Worker ID Number

- ☐ Each Worker Entity Settings page will display both the five-digit Worker ID and the seven-digit Master Worker ID associated with either the SSN or the Work Visa number of the worker.
- ☐ The seven-digit Master Worker ID and all five-digit Worker IDs linked to that Master Worker ID are displayed on the Master Worker Entity page, the Master Worker Hours Report, and the Overlapped Claims by Master Worker report.
- ☐ A Provider is able to view Master Workers within its agency as well as other agencies without viewing other agencies' specific client information.
- ☐ The Master Worker ID will allow users to track workers in AuthentiCare who have more than one five-digit Worker ID.
- ☐ The Master Worker ID tracking allows monitors to review imminent or current overtime, possible quality issues, and potential fraud.

# Master Worker Hours Report Template

- Note the Claim Dates dropdown:  
Weekly or Fixed Date Range only.
- Note, as we go, the change in  
Services names.

**Master Worker Hours Report**  
\* Indicates a required field.

\* **Report Name:** Master Worker Hours Report  
**Description:**

\* **Claim Type:**   
\* **Claim Dates:**   
Fixed Date Range  
Current Week  
Last Week  
**Master Worker:**   
**Provider:** CMC Test Provider   
**Client:**   
**Payer:**   
**Service:**   
All Services  
Level 2 PCS - FE  
Self Directed PCS - FE  
Level 1 PCS - FE  
Adult Day Care - FE  
PERS - Install - FE  
**Sort 1:**   
**Sort 2:**   
**Sort 3:**   
☐ Summary Only  
☐ Overtime Only  
**ReportType(s):** ☒ PDF ☐ Excel ☐ CSV ☐ XML  
**Save As Template** **Run Report**  
**Cancel**

# Master Worker Hours Report



## AuthentiCare® Master Worker Hours Report

Report Date: January 18, 2016 07:58:47 PM

Date Range: 1/10/2016 to 1/16/2016

Master Worker ID:

Provider Id: 567891234B

Client ID:

Total Records Returned: 32

Claim Type: All Claims

Filtered By: Date Range, Claim Type, Provider ID, Service

Sort by: ClaimStart, ClientName, WorkerName

Service: All

Payer ID:

Master Worker Name : TestWorker, RJ				Master Worker ID: 1216884						
Employer : CONSUMER53, KTEST (Self-Direct)				Vendor Fiscal Agent ID : 567891234B				Vendor Fiscal Agent Name: CMC Test Provider		
Claim Number	Client ID	Client Name	Date of Service	Service	Worker Name	Worker ID	Check In	Check Out	Hours Worked	Payer Name
280739	00102369903	CONSUMER53, KTEST	01/10/2016	HCDDT1019	TestWorker, RJ	56769	11:00 AM	02:00 PM	03:00	UHC
280743	00102369903	CONSUMER53, KTEST	01/10/2016	HCDDT1019	TestWorker, RJ	96993	11:00 AM	02:00 PM	03:00	UHC
280744	00102369903	CONSUMER53, KTEST	01/11/2016	HCDDT1019	TestWorker, RJ	56769	08:00 AM	08:00 AM	24:00	UHC

Employer Total : 30:00

Master Worker Total : 30:00

Master Worker Name : Worker 20, Test				Master Worker ID: 2211100						
Employer : Test, Client1 (Self-Direct)				Vendor Fiscal Agent ID : 567891234B				Vendor Fiscal Agent Name: CMC Test Provider		
Claim Number	Client ID	Client Name	Date of Service	Service	Worker Name	Worker ID	Check In	Check Out	Hours Worked	Payer Name
280706	13094215700	Test, Client1	01/12/2016	HCSES5125UD	Worker 20, Test	02592		10:21 PM	00:00	Amerigroup

Employer Total : 00:00

Master Worker Name : Worker 20, Test				Master Worker ID: 2211100						
Employer : CONSUMER53, KTEST (Self-Direct)				Vendor Fiscal Agent ID : 567891234B				Vendor Fiscal Agent Name: CMC Test Provider		
Claim Number	Client ID	Client Name	Date of Service	Service	Worker Name	Worker ID	Check In	Check Out	Hours Worked	Payer Name
280694	00102369903	CONSUMER53, KTEST	01/10/2016	HCDDT1019	Worker 20, Test	02592	01:00 PM	09:00 PM	08:00	UHC
280714	00102369903	CONSUMER53, KTEST	01/13/2016	HCDDT1019	Worker 20, Test	02592	08:00 AM	12:00 PM	04:00	UHC
280715	00102369903	CONSUMER53, KTEST	01/13/2016	HCDDT1019	Worker 20, Test	02592	11:00 AM	01:00 PM	02:00	UHC

# Overlapped Claim by Master Worker Report Template

**Overlapped Claim By Master Worker Report**  
\* Indicates a required field.

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\* **Report Name:** Overlapped Claim By Master Worker Rep

**Description:**

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\* **Claim Type:** All Claims

\* **Claim Dates:** Current Month

**Master Worker:**

**Payer:**

**Client:**

**Provider:** CMC Test Provider

**Service:**

All Services  
Level 2 PCS - FE  
Self Directed PCS - FE  
Level 1 PCS - FE  
Adult Day Care - FE  
PERS – Install - FE

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▬  
v

**Sort 1:** Service Date

**Sort 2:** Client Name

**Sort 3:** Worker Name

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**ReportType(s):** ☒ PDF ☐ Excel ☐ CSV ☐ XML

# Overlapped Claims by Master Worker Report



## AuthentiCare® Overlapped Claim By Master Worker

Report Date: January 18, 2016 08:22:10 PM

Service Date Range: 1/1/2016 to 1/31/2016

Provider Id: 567891234B

Worker Id:

Client Id:

Total OverLaps Returned: 10

Claim Type: All Claims

Filtered By: Date Range, Claim Type, Provider ID, Service

Sort by: DateOfService, ConsumerNameSort, WorkerName

Case Manager Id:

Service: All

Exception:

Master Worker ID : 3370133			Master Worker Name: STestWorker, B											
Master Worker Overlaps : 1														
Claim Number	Worker ID	Worker Name	Provider ID	Provider Name	Client ID	Client Name	SVC	Date of Service	Check In Time	Phone / Location Match	Check Out Time	Phone / Location Match	Payer name	
280712	14182	TestWorker, BSB	567891234B	CMC Test Provider	00102368801	CONSUMER512, KTEST	HCDDT 1019	20160102	10:00AM		3:00PM		Amerigroup	
280713	07707	Steep, Bobbo	567891234B	CMC Test Provider	00102369903	CONSUMER53, KTEST	HCTAT 1019	20160102	12:00PM		5:00PM		UHC	
Master Worker ID : 1216884			Master Worker Name: TestWorker, RJ											
Master Worker Overlaps : 3														
Claim Number	Worker ID	Worker Name	Provider ID	Provider Name	Client ID	Client Name	SVC	Date of Service	Check In Time	Phone / Location Match	Check Out Time	Phone / Location Match	Payer name	
280738	56769	TestWorker, RJ	567891234B	CMC Test Provider	00102369903	CONSUMER53, KTEST	HCDDT 1019	20160103	1:00PM		3:00PM		UHC	
280742	96993	TestWorker, RJ	567891234B	CMC Test Provider	00102369903	CONSUMER53, KTEST	HCDDT 1019	20160103	12:00PM		4:00PM		UHC	
280737	56769	TestWorker, RJ	567891234B	CMC Test Provider	00102369903	CONSUMER53, KTEST	HCDDT 1019	20160105	5:00PM		9:00PM		UHC	
280741	96993	TestWorker, RJ	567891234B	CMC Test Provider	00102369903	CONSUMER53, KTEST	HCDDT 1019	20160105	3:00PM		6:00PM		UHC	
280739	56769	TestWorker, RJ	567891234B	CMC Test Provider	00102369903	CONSUMER53, KTEST	HCDDT 1019	20160110	11:00AM		2:00PM		UHC	
280743	96993	TestWorker, RJ	567891234B	CMC Test Provider	00102369903	CONSUMER53, KTEST	HCDDT 1019	20160110	11:00AM		2:00PM		UHC	
Master Worker ID : 4060772			Master Worker Name: WorkerTest, MCH											
Master Worker Overlaps : 3														
Claim Number	Worker ID	Worker Name	Provider ID	Provider Name	Client ID	Client Name	SVC	Date of Service	Check In Time	Phone / Location Match	Check Out Time	Phone / Location Match	Payer name	
280662	60125	Worker, Komtest	567891234B	CMC Test Provider	00102369901	CONSUMER51, KTEST	HCSES 5125	20160104	10:00AM		12:00PM		Amerigroup	
280665	35418	Worker, Komtest	100027399A	MCH Test Provider		****Masked****,	HCSES 5125UD	20160104	10:00AM		11:00AM		Amerigroup	

# The Workers by Provider Report Template

- ❑ Note the SSN/Work Visa Status field.  
There is a choice of All, Missing Both, Missing SSN or Missing Work Visa.

The screenshot shows a web-based form titled "Worker By Provider Report". At the top, it states "\* Indicates a required field." Below this, there are fields for "Report Name" (set to "Worker By Provider Report") and "Description" (empty). Further down, the "Worker Start Date Range" is set to "Current Month". The "Provider" is "CMC Test Provider" and the "Worker" field is empty. The "Service" dropdown menu is open, showing options: "All Services", "Level 2 PCS - FE", "Self Directed PCS - FE", "Level 1 PCS - FE", "Adult Day Care - FE", and "PERS - Install - FE". The "\* Worker Status" dropdown is set to "All". The "\* SSN/Work Visa Status" dropdown is open, showing options: "All", "Missing (Both)", "Missing SSN", and "Missing Work Visa". Below these are sorting options: "Sort 1" is "Start", "Sort 2" is "Worker Name", and "Sort 3" is "Worker ID". At the bottom, the "ReportType(s)" section has checkboxes for "PDF" (checked), "Excel", "CSV", and "XML". The form concludes with three buttons: "Save As Template", "Run Report", and "Cancel".



# The AuthentiCare Workers by Provider Report



## AuthentiCare® Workers by Provider Report

Report Date: January 18, 2016 08:27:54 PM

Provider ID: 567891234B

Worker ID:

Total Records Returned: 24

Filtered By: Worker Start Date Range, Provider ID, WorkerStatus, Service

Sort by: EffectiveDateStart, WorkerName, ChildXRef

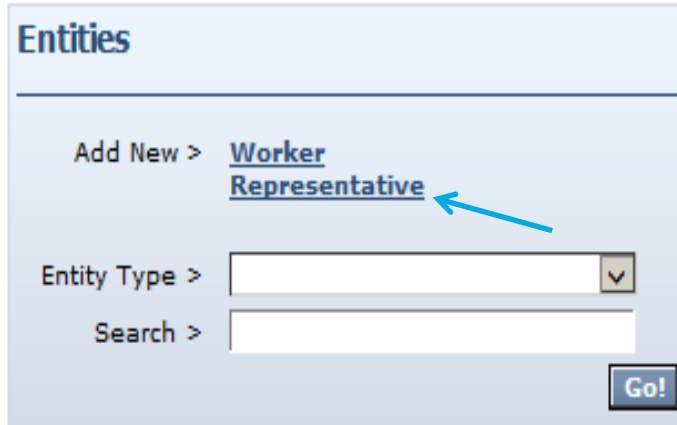
Worker Status: All

Service: All

Provider Name : CMC Test Provider		Provider ID : 567891234B		Provider Service:		
				HCFES5125,HCFES5125UD,HCFES5130,HCFES5101,HCFES5160 ,HCFES5190,HCFET1001,HCFET2025,HCFES5135,HCFES5135 UD,HCFDDT1019,HCFDDT2025,HCFDDH0045,HCFDDT1000,HCFDDT1000 TD,HCPDS5125U6,HCPDT2025,HCHIS5125UB,HCHIT2025,HCTAT 1019,MFFES5125,MFFES5125UD,MFFES5130,MFFES5101,MFFES 5160,MFFES5190,MFFET1001,MFFET2025,MFFES5135,MFFES5135 UD,MFDDT1019,MFDDT2025,MFDDH0045,MFDDT1000,MFDDT1000 TD,MFPDS5125U6,MFPDT2025,MFHIS5125UB,MFHIT2025,HCFET 2029,HCFET2040U2,HCFES5161,HCFES0315,HCFES0317,HCFES 5185,MFFET2040U2,MFFES5161,MFFET2029,MFFES0315,MFFES 0317,MFFES5185,HCFDDT2040U2,MFDDT2040U2,HCPDT2040U2 ,MFPDT2040U2,HCHIT2040U2,MFHIT2040U2,HCTAT2040U2,HCFES 5125,HCPDS5125U9,HCPDS5185,HCHIS5125U9,HCHIT1505,MFPDS 5185,MFHIT1505UB,MFHIT1505		
Worker Id	Worker SSN	Worker Name	Start Date	Termination Date	Sanctions	Worker Service
11569	*****2323	CTestWorker, L	01/01/2016			HCFES5125,HCFES5125UD,HCFES5130,HCFES5101
60480	*****2151	STest, SWorker	01/01/2016			HCFES5125,HCFES5125UD,HCFES5130,HCFES5101
07707	*****9400	STestWorker, B	01/01/2016			HCFES5125,HCFES5125UD,HCFES5130,HCFES5101
44194	*****4444	Test, Worker12	01/01/2016			HCFES5125,HCFES5125UD,HCFES5130,HCFES5190,HCFET1001,HCFET2025,HCFES5135,HCFES5135UD,HCFDDT1019,HCFDDT2025,HCFDDH0045,HCFDDT1000,HCFDDT1000TD,HCPDS5125U6,HCPDT2025,HCHIS5125UB,HCHIT2025,HCTAT1019,MFFES5125,MFFES5125UD,MFFES5130,MFFES5190,MFFET1001,MFFET2025,MFFES5135,MFFES5135UD,MFDDT1019,MFDDT2025,MFDDH0045,MFDDT1000,MFDDT1000TD,MFPDS5125U6,MFPDT2025,MFHIS5125UB,MFHIT2025,HCFET2029,HCFET2040U2,HCFES5161,HCFES0315,HCFES0317,HCFES5185,MFFET2040U2,MFFES5161,MFFET2029,MFFES0315,MFFES0317,MFFES5185,HCFDDT2040U2,MFDDT2040U2,HCPDT2040U2,MFPDT2040U2,HCHIT2040U2,MFHIT2040U2,HCTAT2040U2,HCFES5125,HCPDS5125U9,HCPDS5185,HCHIS5125U9,HCHIT1505,MFPDS5185,MFHIT1505UB,MFHIT1505
19319	*****1212	TestWorker, KC	01/01/2016			HCFES5125,HCFES5125UD,HCFES5130,HCFES5101
00283	*****6665	TestWorker, NS	01/01/2016			HCFES5101,HCFES5160,HCFES5190,HCFET1001

# Representatives Are Created by Providers

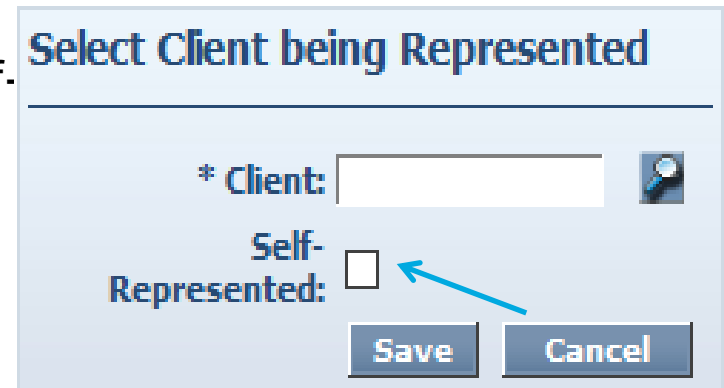
- ❑ Providers select “Add New Representative” from the Entities box on the Home page and Select Go!.



The screenshot shows a web form titled "Entities". Below the title, there is a section with the text "Add New > Worker Representative". A blue arrow points to the underlined text "Worker Representative". Below this, there is a field labeled "Entity Type >" with a dropdown menu. At the bottom, there is a field labeled "Search >" and a "Go!" button.

- ❑ A new page displays: “Select Client being Represented.”

- ❑ Providers add “Client” and check the “Self-Represented” box if the client chooses to self-represent, or leave the box blank if the client wants someone else to represent him/her.




The screenshot shows a web form titled "Select Client being Represented". Below the title, there is a field labeled "\* Client:" with a text input box and a magnifying glass icon. Below this, there is a field labeled "Self-Represented:" with a checkbox. A blue arrow points to the checkbox. At the bottom, there are two buttons: "Save" and "Cancel".

# One Possible Result After the Save:

- ❑ Providers select Cancel, if the EIN message is received;
- ❑ then return to the Home Page to search for the Client.
- ❑ When the Client Entity Settings page displays, the provider adds the EIN, and selects Save at the bottom of the page.

EIN is mandatory for Self-Directed services.

## Select Client being Represented

\* Client: CONSUMER502, KTEST 

Self-Represented: ☒

Save

Cancel

## Client Entity Settings

\* Indicates a required field.

ID: 00102368800

PIN: \*\*\*\*\*

\* First Name: KTEST

Middle Name:

\* Last Name: CONSUMER502

Company Name:

SSN:

EIN: 123456789 x

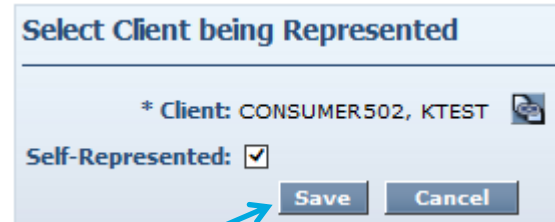
\* Gender: Male

\* Birth Date: 2/20/1955

Email Address:

# Continue the Representative Set-Up

- ❑ Providers return to the Home page and select Add Representative again. The “Select Client being Represented” page displays again.
- ❑ Providers complete the fields as described, selecting Self-Represented or not per the client and enter Save.
- ❑ The Representative Entity Settings Page displays. Providers add a Begin Date for the Representative.

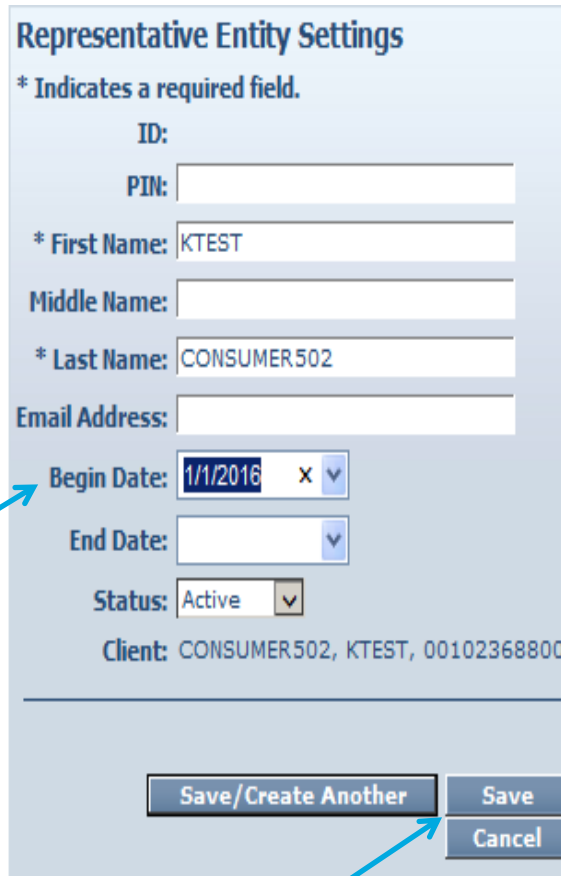


Select Client being Represented

\* Client: CONSUMER502, KTEST

Self-Represented: ☒

Save Cancel



Representative Entity Settings

\* Indicates a required field.

ID:

PIN:

\* First Name: KTEST

Middle Name:

\* Last Name: CONSUMER502

Email Address:

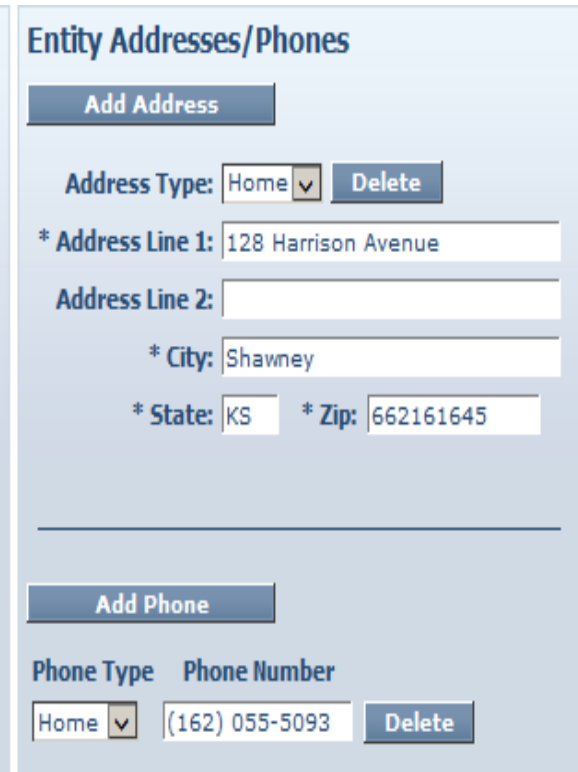
Begin Date: 1/1/2016 x v

End Date: v

Status: Active v

Client: CONSUMER502, KTEST, 00102368800

Save/Create Another Save Cancel



Entity Addresses/Phones

Add Address

Address Type: Home v Delete

\* Address Line 1: 128 Harrison Avenue

Address Line 2:

\* City: Shawney

\* State: KS \* Zip: 662161645

Add Phone

Phone Type Phone Number

Home v (162) 055-5093 Delete

## Another Possible Result After this Save:

- ❑ If the Client/Representative has been created previously, the Confirm Representative message will appear to offer the provider a choice to continue to replace the current Representative or to keep the current Representative, all dependent upon the client's wishes.

**Confirm Representative**

---

Active Representative already exists for CONSUMER502, KTEST(ID: 00102368800).  
Creating the Representative will End-Date the present Representative.  
Do you want to continue?

# Again: The Representative Entity Settings Page

**Representative Entity Settings**

\* Indicates a required field.

ID:

PIN:

\* First Name:

Middle Name:

\* Last Name:

Email Address:

Begin Date:  x v

End Date:  v

Status:  v

Client: CONSUMER502, KTEST, 00102368800

**Entity Addresses/Phones**

Address Type:  v

\* Address Line 1:

Address Line 2:

\* City:

\* State:  \* Zip:

Phone Type	Phone Number	
<input type="text" value="Home"/> v	<input type="text" value="(162) 055-5093"/>	<input type="button" value="Delete"/>

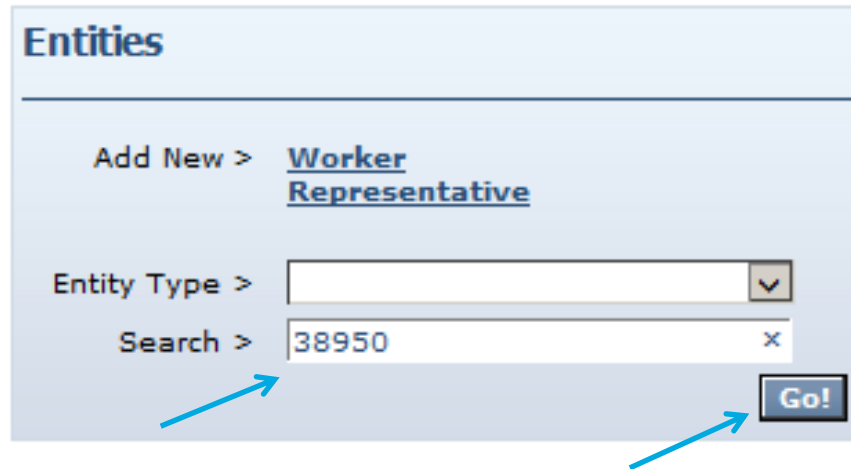
- ☐ The Representative Entity Settings page displays again with the client's prepopulated information as, in this scenario, the client remains self-represented.
- ☐ A provider will enter a Begin Date, then will select Save.

# The Representative Successfully Saved

- ❑ The successful Save message appears with the Representative ID number:

Successfully saved Representative - KTEST CONSUMER502 (ID: 38950)

- ❑ The provider will enter the Representative ID number in the Search field on the Home page, then will select Go!.



The screenshot shows a web form titled "Entities". Below the title, there is a link "Add New > Worker Representative". Below that, there is a label "Entity Type >" followed by a dropdown menu. Below the dropdown, there is a label "Search >" followed by a text input field containing the value "38950". To the right of the input field is a small "x" icon. Below the input field, there is a blue arrow pointing to it. To the right of the input field, there is a "Go!" button. A blue arrow points to the "Go!" button.

## Representative Entity Settings

\* Indicates a required field.

ID: 38950

PIN: \*\*\*\*\*

\* First Name: KTEST

Middle Name:

\* Last Name: CONSUMER502

Email Address:

Begin Date: 1/1/2016

End Date:

Status: Active

Client: KTEST CONSUMER502, 00102368800

Save

Cancel

Delete

Note:

[Add Note](#)

### Note Data

No note data was found.

### Audit Data

[\[View Audit Data\]](#)

## Entity Addresses/Phones

[Add Address](#)

Address Type: Home [Delete](#)

\* Address Line 1: 128 Harrison Avenue

Address Line 2:

\* City: Shawney

\* State: KS \* Zip: 662161645

[Add Phone](#)

Phone Type Phone Number

Home (162) 055-5093 [Delete](#)

## Registered Users

[Add User](#)

- ☐ The provider selects Add User, then selects Save.



## Provider Adds the Representative as a User

- ❑ The Register page displays. The provider chooses the User Role of KS\_Representative; adds the Email Address; adds Password; completes Confirm Password and selects Register.

**Register**  
Use your assigned ID and PIN plus your e-mail address and a password you choose to register for access to the website.

\* Email Address:

\* Password:

\* Confirm Password:

\* User Roles:

- KS\_ClaimsMgt2
- KS\_HumanResources
- KS\_IntakeReferral
- KS\_Payroll/Billing
- KS\_Payroll/Billing/HumanResources
- KS\_Representative**
- KS\_Scheduler/Coordinator

**Rights:**

- Edit Claims
- View Claims
- Edit Representatives
- View Representatives
- Website Access
- Reports
- Time and Attendance Report
- Confirm Billing

# Registration Added Successfully

Registration added successfully.

## Representative Entity Settings

\* Indicates a required field.

ID: 38950

PIN: \*\*\*\*\*

\* First Name: KTEST

Middle Name:

\* Last Name: CONSUMER502

Email Address:

Begin Date: 1/1/2016

End Date:

Status: Active

Client: KTEST CONSUMER502, 00102368800

Save

Cancel

Delete

Note:

[Add Note](#)

Note Data

## Entity Addresses/Phones

Add Address

Address Type: Home

Delete

\* Address Line 1: 128 Harrison Avenue

Address Line 2:

\* City: Shawney

\* State: KS

\* Zip: 662161645

Add Phone

Phone Type Phone Number

Home

(162) 055-5093

Delete

## Registered Users

Add User

User Name	Role	Registered On	Enabled	Delete
<a href="#">Test@502Consumer.com</a>	KS_Representative	01/14/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>

# Now the Representative Can Access AuthentiCare®

Home | Reports | My Account | Custom Links | Logout Logged in as: Test@502Consumer.com

Successfully saved Representative - KTEST CONSUMER502 (ID: [38950](#))

**Entities**

Search

>

**Go!**

- ☐ The Representative logs into AuthentiCare.
- ☐ This is the Representative Home Page. Note the limited toolbar and the modified Home Page.
- ☐ The Representative searches for himself/herself by selecting Go! in the Entities section.

**Claims**

☒ Claim

Search Type: ☐ Confirm Billing - View ☐ Confirm Billing - Bulk

Claim ID:

**Go! Clear**

Claim Status:

Claim Start:

Claim End:

Service:

Authorization ID:

Client:

Provider:

Worker:

Representative:

Procedure Code:

User Option:

☐ Include Inactive Claims?

**Go! Clear**

# The Representative Entity Settings Page Displays

[Home](#) | [Reports](#) | [My Account](#) | [Custom Links](#) | [Logout](#)

Logged in as: Test@502Consumer.com

### Representative Entity Settings

\* Indicates a required field.

ID: 38950

PIN:

\* First Name: KTEST

Middle Name:

\* Last Name: CONSUMER502

Email Address:

Begin Date: 1/1/2016

End Date:

Status: Active

Client: KTEST CONSUMER502, 00102368800

[Save](#) [Cancel](#)

### Entity Addresses/Phones

[Add Address](#)

Address Type: Home

\* Address Line 1: 128 Harrison Avenue

Address Line 2:

\* City: Shawney

\* State: KS \* Zip: 662161645

[Add Phone](#)

Phone Type	Phone Number
Home	(162) 055-5093

### Receive Alerts

Email Address for Alerts:

☒ Check-In ☒ Check-Out

### Note:

[Add Note](#)

### Note Data

No note data was found.

### Audit Data

[\[View Audit Data\]](#)



- ☐ The Representative adds a valid Email Address for Alerts, chooses which alerts to receive, then selects Save.

## After the Save – Back to the Home Page

Home | Reports | My Account | Custom Links | Logout Logged in as: Test@502Consumer.com

Successfully saved Representative - KTEST CONSUMER502 (ID: 38950)

### Entities

Search >

**Go!**

### Claims

☒ Claim

Search Type: ☐ Confirm Billing - View  
☐ Confirm Billing - Bulk

Claim ID:

**Go!** **Clear**

Claim Status:

Claim Start:

Claim End:

Service:

Authorization ID:

Client:

Provider:

Worker:

Representative:

Procedure Code:

User Option:

☐ Include Inactive Claims?

**Go!** **Clear**

- ❑ To view a report, the Representative selects Reports from the toolbar.

# The Representative Report Selection Page Displays

**Report Templates** [Delete Selected Templates]

---

**Create Reports**

---

[Time and Attendance](#)  
Time and Attendance Report

**View Reports** [Refresh] [Delete Selected Reports]

---

<input type="checkbox"/>	<u><a href="#">Name</a></u>	<u><a href="#">Submit Time</a></u>	<u><a href="#">Status</a></u>
--------------------------	-----------------------------	------------------------------------	-------------------------------

- ☐ A Representatives have access to the Time and Attendance Report for himself or herself, if the client self-represents, or for the client he/she represents.
- ☐ Representatives are to contact the FMS Provider to receive instruction to create a report template with the filters and sorts preferred, and to run the report.

# Representative Claim Views and Confirmation Access

**Entities**

Search >

Go!

**Claims**

☒ Claim

Search Type: ☐ Confirm Billing - View  
☐ Confirm Billing - Bulk

Claim ID:

Go! Clear

Claim Status:

Claim Start:

Claim End:

Service:

Authorization ID:

Client:

Provider:

Worker:

Representative:

Procedure Code:

User Option:

☐ Include Inactive Claims?

Go! Clear

- ❑ All Representatives have access to search and view claims from searches on the Home page.

The Representative role of self-directing clients also has the right to confirm self-direct services claims.

- ❑ Providers are to teach Representatives how to manage these claims functions.

# The Representative Email Alert Format

- ❑ For Check-In Emails, the subject line is “Worker Check-in.”

Worker \_\_\_\_\_ has checked in to provide services\_\_\_\_\_.

- ❑ For Check-out emails, the subject line is, “Worker Check-out.”

Worker Hours are fewer than 30.

*Worker \_\_\_\_\_has checked out from providing services\_\_\_\_\_.*

Worker Hours are greater than or equal to 30 and fewer than 38.

*Worker \_\_\_\_\_has checked out from providing services \_\_\_\_\_.*

*Worker \_\_\_\_\_has worked 30 or more hours this week.*

Worker Hours are greater than or equal to 38 but fewer than or equal to 40.

*Worker \_\_\_\_\_has checked out from providing services \_\_\_\_\_.*

*Worker \_\_\_\_\_has worked 38 or more hours this week.*

Worker Hours are greater than 40.

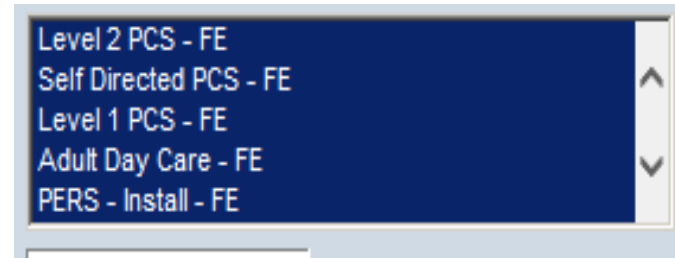
*Worker \_\_\_\_\_has checked out from providing services\_\_\_\_\_.*

*Worker \_\_\_\_\_has worked XXX hours of overtime this week.*

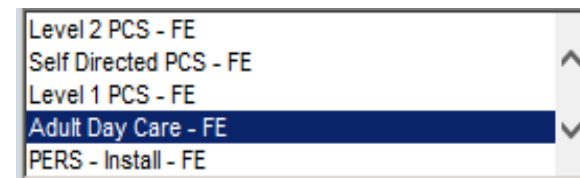


# Changes in Services Names – Names Become Acronyms

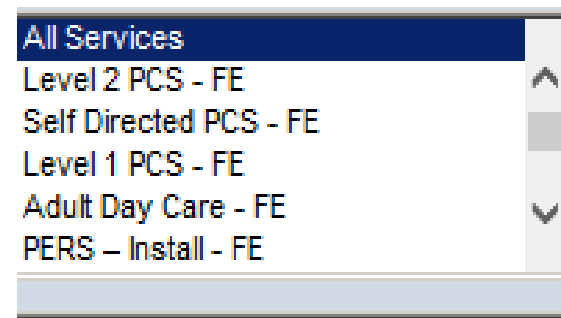
- ❑ Found on the Provider Entity Settings Page:



- ❑ Found on the Worker Entity Settings Page:



- ❑ Found on all Report templates:



# Changes in the IVR Prompts and Language

- ❑ A Direct Support Worker (DSW), upon entering his/her Worker ID on January 22, 2016, will hear the following prompts:
  - To Check In, press 1
  - To Check Out, press 2
  - For hours worked this week, press 3
  
- ❑ A Direct Support Worker (DSW), at the end of a check-out, will hear:

You worked \_\_\_\_hours and \_\_\_\_ minutes for employer (client name, if self-direct) OR (agency name, if agency-direct).
  
- ❑ A Direct Support Worker, during the IVR call will hear the services name changes described on the previous page and detailed on the next page.

# The Details of Services Name Changes

- ❑ “IDD” will replace “MRDD” and “MFDD” in AuthentiCare to match current IDD waiver language. “IDD” will be seen in AuthentiCare and in the Mobile App. “IDD” will be heard on the IVR. *Please advise all Direct Support Workers they will hear “IDD” as a replacement for “MRDD” or “MFDD” on January 22, 2016.* (Waiver changes displayed in AuthentiCare: MRDD is changed to IDD and MFMRDD is changed to MFIDD.)
- ❑ Personal Care Services will replace all attendant care services in AuthentiCare to match current waiver language. *On January 22, 2016 this change will be made in AuthentiCare.*
- ❑ Personal Care Services will be listed as the acronym “PCS” and will be displayed in AuthentiCare and in the Mobile App. “PCS” will be heard on the IVR. *Please advise all Direct Support Workers they will hear “PCS” for Personal Care Services early on January 22, 2016. For instance, “FE Level 1 Attendant Care” will be “FE Level 1 PCS.”*
- ❑ Personal Emergency Response System and Personal Emergency Response Installation will be noted as “PERS” and “PERS Installation” in AuthentiCare on January 22, 2016 and in the Mobile App. “P E R S” (not “purrs”) Install will be heard on the IVR. *Please advise PERS Installers that they will hear this acronym early on January 22, 2016.*

# Your AuthentiCare Contacts

## ☐ For Provider Assistance:

Mary McMichael, Product/Account Management - 1-402-222-8823

[mary.mcmichael@firstdata.com](mailto:mary.mcmichael@firstdata.com)

Suzanne O'Donnell, Kansas Relationship Manager – 1-402-222-5325

[suzanne.odonnell@firstdata.com](mailto:suzanne.odonnell@firstdata.com)

Candace M. Cobb, Business Analyst - 1-785-727-6044

[candace.cobb@firstdata.com](mailto:candace.cobb@firstdata.com)

Client Services: [AuthentiCare.Support@firstdata.com](mailto:AuthentiCare.Support@firstdata.com) - 1-800-441-4667

## ☐ For Representative Assistance:

The Client/Representative's FMS Provider

**THANK  
YOU**